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CONFIRMATION NO. 9483

<b>SERIAL NUMBER</b> 10/083,656	<b>FILING OR 371(c) DATE</b> 02/25/2002 <b>RULE</b>	<b>CLASS</b> 220	<b>GROUP ART UNIT</b> 3781	<b>ATTORNEY DOCKET NO.</b> 4009.007.201
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**APPLICANTS**  
 Nouri E. Hakim, Monroe, LA;

**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CON of 09/271,779 03/18/1999 PAT 6,357,620 which is a CIP of 09/138,588 08/21/1998 PAT 6,321,931 which claims benefit of 60/056,218 08/21/1997  
 This application 10/083,656 is a CIP of 10/001,257 11/27/2001 PAT 7,204,386 which is a CON of 09/138,588 08/21/1998 PAT 6,321,931 which claims benefit of 60/056,218 08/21/1997

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
*None b/f*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*** 03/18/2002 **\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials	<b>STATE OR COUNTRY</b> LA	<b>SHEETS DRAWING</b> 17	<b>TOTAL CLAIMS</b> 17	<b>INDEPENDENT CLAIMS</b> 3
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**ADDRESS**  
 Morris E. Cohen  
 1122 Coney Island Avenue, Suite 217  
 Brooklyn, NY 11230-2345

**TITLE**  
 No-spill drinking cup apparatus

<b>FILING FEE RECEIVED</b> 1010	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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